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BOROUGH of GOSPORT

Hants



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

P. V. PRITCHARD
M.D., F.R.C.P.(Edin.), F.R.F.P.S.(Glas.), D.P.H.

For the Year

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Page

HEALTH COMMITTEE

1958-59

His Jorship The Mayor Alderman P.D.BLANCH

Chairman: Alderman J.A.WHEELER, J.P.

Vice-Chairman: Councillor C.W.L.GILES

Aldermen: I.C.T.MORGAN

L.C.OLD

Councillors: R.K.BROWNING (from Sept.1958)

Mrs B.CARTER (to Nov.1958)

W.A.CHIDLOW H.W.COOLEY

A.K.DIBLEY (deceased July 1958)

E.T.W.LANDER
V.E.J.NEAL
H.R.PINK
A.POLLARD
F.R.TOVEY
J.A.WAKEFIELD

Alterations for 1959-60:-

His Worship The Mayor Councillor C.W.L.GILES in place of Alderman P.D.BLANCH

Vice-Chairman Councillor E.T.V.LANDER in place of Councillor C.W.L.GILES

HOUSING COMMITTEE

1958-59

His Worship The Mayor Alderman P.D.BLANCH

Chairman: Alderman A.R.NOBES, O.B.E., J.P.

Vice-Chairman: Alderman L.C.OLD

Aldermen: E.W.J.PAYNE

J.A.WHEELER. J.P.

Councillors: Sir W.AGNEW

R.K.BROWNING (from Sept.1958)

Mrs B.CARTER

A.K.DIBLEY (deceased July 1958)

C.W.L.GILES H.G.C.M.JARRETT

J.KEAST S.W.MABEY A.J.OVENS, J.P. A.POLLARD H.WELCH, O.B.E.

Alterations for 1959-60:-

His Worship The Mayor Councillor C.W.L.GILES in place of Alderman P.D.BLANCH

Councillor G.C.NAYNARD in place of Councillor H.WELCH, O.B.E.

STAFF

Medical Officer of Health

P.V.PRITCHARD, M.D., F.R.C.P. (Edin), F.R.F.P.S. (Glas), D.P.H.

Assistant Medical Officer of Health

S.G.GORDON, M.B., B.S., D.T.M & H., D.P.H., D.C.H., (Appointed 14.1.58)

Chief Public Health Inspector

H.G.COPE, M.R.S.H., Meat & Food Insp Cert

Senior Assistant Public Health Inspector

J.G.POGSON, Cert R San I, Meat & Food Insp Cert, Smoke Insp Cert (Appointed 1.3.59)

Public Health Inspectors

A.W.P.ROBINSON, Cert R San I, Meat & Food Insp Cert (Resigned 31.8.58)
F.O.ELLIOTT, Cert R San I, Meat & Food Insp Cert
G.BROWNSWORD, Cert R San I, Meat & Food Insp Cert (Appointed 1.4.58)

Pupil Public Health Inspector

P.HERBERT (Resigned 6.12.58)

Shops Acts Inspector

A.E.GORMAN

Senior Clerk

H.J.MOORE

Senior Shorthand Typist

Miss J.G.FISHER

Assistant Clerks

A.BELL

Miss D.A.SWEETLAND Mrs D.JOHNSON (from 31.3.59)

Rodent Control Operator/Mortuary Attendant and Disinfector/Mosquito Sprayer

S.C.BENNER (Resigned May 1959) J.OSGOOD (from May 1959) G.SPENCE

General Assistant

J.OSGOOD (to May 1959) H.PALMER (from May 1959)

Divisional School Health Department Clerks (County Council)

Miss M.THOMPSON
Mrs J.M.ELLIOTT
Mrs J.BUCKLER (Appointed 28.4.58)

Town Clerk

E.G.J.ADDENBROOKE, O.B.E., B.A.(Oxon), F.R.G.S.

INTRODUCTION and GENERAL COMMENTS

To The Mayor, Aldermen and Councillors of the Borough of Gosport.

Mr. Mayor, Ladies and Gentlemen,

1. I have the honour to present this, my fifth, Annual Report on Gosport's health and relevant services for 1958.

2. AGE and SEX DISTRIBUTION of POPULATION (Table 3)

- (a) The RAPID GROWTH of GOSPORT in recent years is evident from noting that in 1921 the population was 35,000. Ten years later it had risen by only 3,000 to 38,000. In the next 20 years however it increased by 20,000 to 58,000. Since the 1951 Census it has gone up to the Estimated Mid-Year figure of over 65,000 for 1958.
- (b) This Table also records that about 3,000 of the inhabitants are over 70 years of age. This problem of OLD AGE and the CARE of these OLD PEOPLE is increasing year by year as the proportion to the total population increases. There are about 20,000 young persons under 20 years of age so that some 23,000 inhabitants are mainly dependent on the efforts of the remaining 40,000. A large proportion of these are women who are not out at work. The situation is that more elderly people are in need of assistance in some form or other than before, and in proportion there are fewer potential sources of contribution to the public purse to provide the necessary financial help.

3. LIVE BIRTHS and BIRTH RATES . (Table 4)

- (a) There were 1,262 Live Births registered for Gosport, about 200 more than in 1957. Our Birth Rate of 19.3 is much higher than the rate for the country as a whole at 16.4. For many years we have recorded this higher comparison. It is of interest, however, to note the fall from the high average as shown in Table 12 for the period 1914-1918.
 - (b) There were 57 Illegitimate Live Births as against 37 for last year.

4. DEATHS in AGE GROUPS (Table 6)

- (a) This new Table deserves a close study. For each of the four years the actual number of deaths have been recorded, firstly for under 1 year of age and then in 5-year periods. Each of these returns have been expressed as a percentage of the total deaths. In the "Accumulative" columns the returns are made for all deaths up to and including the period under review. These totals have been expressed as percentages.
- (b) In all four years the age group 75-80 shows the highest number of deaths. More than half of all deaths occurred after the age of 70. Less than 10% of deaths occur before the age of 40. Only about a quarter of all our deaths were for people under age 60.

5. DEATHS by AGE PERIODS and SEX (Table 7)

- (a) This Table is set out in the form of Isotype information. It clearly shows the age periods of greatest death risk. There were 618 deaths in 1958 against 494 in the previous year.
- (b) A study of the last two columns shows that the increase in the total deaths was in persons under 1 year and over 60 years of age.

6. CAUSES of DEATHS (Table 8)

- (a) Many accepted authorities on CANCER are of the opinion that much can be done to reduce the incidence of advanced disease and death by suitable Health Education.
- (b) Deaths from HOME ACCIDENTS and those not associated with Motor Vehicles numbered 15. On looking down the Table to find other groups for comparisons, the importance of this cause of death is obvious. It is nearly four times greater than Respiratory Tuberculosis; it is more than Cancer of the Breast. Much is written and said about Cancer and Tuberculosis. Too little attention is paid to Home Accidents which cause, not only this large number of deaths but many permanent

disabilities and disfigurements. In last year's Annual Report I reminded you of the facts that most of these accidents were preventable, that the Ministry accepted Prevention of Home Accidents as part of the duties of a Public Health Department. Much more public interest is needed and here is another theme for Health Education.

7. DEATHS and DEATH RATE (Table 9)

- (a) With 618 deaths against 494 for last year our Death Rate rose from 10.1 to 12.5. This is no longer better than the rate for England and Wales.
- (b) Our increases are noted in the Cancer group, Vascular Lesions of the Nervous System, Coronary Disease, Heart and Circulatory Diseases and Pneumonia as is noted in Table 8.

8. INFANT MORTALITY and RATE (Table 11)

- (a) Gosport's increase of Infant Deaths from 19 last year to 38 this year raises the Mortality Rate from 17.4 to 30.1, a bad record especially when compared to the fall for the Country as a whole, from a rate of 23.0 to 22.6, an all time lowest.
- (b) This increase in deaths called for a special investigation. Eight of these were in babies who lived for less than a day, eighteen lived for less than a week and twenty-five lived for less than a month. Of the thirteen who lived for more than 4 weeks, eight survived half the year and five died between their 6th and 12th month. Premature birth was the commonest "cause" of death. The fall from 28 Still Births last year to 21 for 1958 (see Table 5) must be taken into consideration. Some babies who might have been born dead and recorded in that category were born alive and failed to survive. Prematurity and Still Births are Ante-Natal problems.

9. HEALTH PICTURE COMPARISON (Table 12)

- (a) In this Table an old five year period, 1914-1918, is compared with the last five year period 1954-1958.
- (b) As is expected there has been an all round improvement, in some cases to a remarkable degree. The most outstanding differences are found in statistics dealing with children. The deaths of children then averaged 93 a year in Gosport in a much smaller population. Now we average 31 deaths a year for more than double the population. The change for infants is from a Mortality Rate average of 69.5 to our present average of 22.7.

10. INFECTIOUS DISEASES INCIDENCE (Tables 13 - 14)

- (a) POLIOMYELITIS was almost absent during the year. Only two cases, both paralytic, were notified. Both were in boys. One was mild with an early recovery the other very severe and, for a time, he seemed in danger of permanent handicap. He was an excellent patient and his complete recovery is largely due to his own determination to become normal. Co-operation came from all sources. As soon as it was possible, his education was continued by a home tutor. Then special transport arrangements were made for part time schooling while he still attended Physio Therapy clinics.
- (b) DYSENTERY, an intestinal infection, was prevalent. There were 20 notified cases. It was evident from general information that there were probably many more sufferers who were not notified. A sufferer is a potential danger to the people he is associated with, not only by direct contact, but by indirect channels through articles and foods he has possibly contaminated. It is clearly necessary that all measures of control should be applied to prevent the spread. These measures can be best applied by the Health Department. We can only take action if we are informed, as we should be, by the Medical Attendant "notifying" the case. He can only do his investigation and notification if his assistance is sought by the patient or patient's parents. For everybody's sake there should be no break in any of the links. Delay in taking action multiplies the risks.

11. IMMUNISATION against DIPHTHERIA, WHOOPING COUGH and TETANUS (Tables 15-19)

- (a) Table 15 shows that whereas Gosport has a better record for DIPHTHERIA IMMUNISATION IN INFANCY, with 49% of the potential infants being protected, than the County as a whole or the average for Hampshire Urban Districts, it is not as good as some of our neighbours, such as Fareham or Winchester.
 - (b) A similar state exists in respect of WHOOPING COUGH IMMUNISATION.

- (c) Table 17 breaks down the RETURNS for DIPHTHERIA, WHOOPING COUGH and TETANUS IMMUNISATION for the year. The potential uptake for the under-one-year group is the natural increase figure in the year, about 1,000. The protection of 620 infants against Diphtheria and 634 against Whooping Cough is still too low but an improvement on last year's returns of 583 and 577 respectively. Boosters for both Diphtheria at 279 total and Whooping Cough at 279 total are very low. There is obviously need for more Health Education on the subject of Immunisation. Booster returns for 1957 were 310 and 241 and for 1956 519 and 365 respectively.
- (d) Table 18 is a COMPREHENSIVE "LADDER" SURVEY year by year up to school leaving age. This Table should be studied together with Table 17. We have a natural increase of births over infant deaths of about 1,000 a year. Thereafter this 1,000 unit is taken as the rough measure of the potential number of children to be protected. To interpret the Table read down any column to note how many children born in a particular year are protected by a Primary Course or Booster Dose. Take the first column for children born in 1944, for example. By 1958 in this birth group about 600 had received a Primary Course and about 300 of these had received a subsequent Booster Dose for DIPHTHERIA. Study the column on the right for the totals. Take the DIPHTHERIA IMMUNISATIONS carried out in 1957. ages there were 923 Primary Courses and 305 Booster Doses. The 923 would, for our approximate 1,000 potential in any year, have been excellent if the number referred to protection in the first, or by the latest, the second year. The fact is that it included 238 children immunised at a later age. These children had been neglected, they had been allowed to remain in an unprotected state too long. This and our problem of the comparatively poor response to the offer of the Booster Dose protection is something which should be remedied.

12. VACCINATION against SMALLPOX (Tables 20 - 22)

Gosport, for the past few years, has had a better record for Vaccination than the County as a whole and most of the other areas. This lead is no longer so clear in parts, and, in fact, our 68.0% for Infant Vaccinations is beaten by the average of 69.8% for Hampshire Urban Areas. Last year my report contained this remark — "There is need for more persuasion and Health Education relevant to the need for a greater degree in protection against this disease."

13. VACCINATION against POLIOMYELITIS (<u>Table 23</u>)

This Table sets out the change in administration and the excellent beginning of our POLIOMYELITIS IMMUNISATION SCHEME. By the end of the year nearly 8,000 young persons had been protected.

14. TUBERCULOSIS (Tables 24 - 27)

THE REGISTER (Table 24)

As each new case is notified the name gets added to THE REGISTER. to an increase in numbers on that record as the removals from it do not keep pace with the additions. The Register changes cannot therefore be used to analyse the prevalence or otherwise of the disease in an area. As expected the Register figures show an increase each year in the Table. The number of patients sent in to Sanatorium however show a steady decline as more treatment with our ever increasingly effective drugs is given at the Clinic and at home.

- (b) AGE and SEX DISTRIBUTION (<u>Table 25</u>)
- (i) A study of this Table helps to answer the question of PREVALANCE and MORTALITY.
- (ii) During the last four years the NEW CASES added to the Register have been 76, 49, 37 and 59. (iii) The DEATHS have been, for those years 2, 4, 6 and 4.
 - - (c) DEATH RATE (Table 26)

Gosport at 0.06 has a better rate than England & Wales at 0.09.

(d) RATE of INCIDENCE - COMPARISON with OTHER AREAS

Gosport's RATE of INCIDENCE of RESPIRATORY TUBERCULOSIS has fluctuated from 1.58 in 1951, through 1.21, 1.36, 0.77, 1.11, 0.06, 0.49 to 0.81 in 1958. Rates for the County have generally been lower.

15. WORK of PUBLIC HEALTH INSPECTORS - GENERAL SANITARY DUTIES (Table 43)

I cannot commend the policy of judging the work of a Department solely by the number of visits made. Quality is as important, if not more so than Quantity.

The latter however gives a guide to those supervising the services as to the general occupation of the Staff. Taken in conjunction with Tables 47 and 63 and the other parts of this Report it is clear that the Public Health Inspectors are over-worked in the calls made upon them for attention and that the Department is grossly understaffed for the proper care and safety of a town of this size. In Gosport we have 4 inspectors. Our proportion is about 1 to 16,000 persons, the average throughout England is 1 to 9,300 and it is generally accepted that the proportion should be 1 to between 8,000 and 10,000 population. Gosport should have at least 6 inspectors and that would be the absolute minimum. The urgent need for additional staff is reported yearly. The problem is even more urgent now with such recent legislation as Food Hygiene, Clean Air and Rent Act.

16. GENERAL PROVISION of HEALTH SERVICES (Section G)

This section is set out mainly for reference. The majority of the services referred to here are provided through the County Health or Education Authority. Gosport has a problem in this division of Health Services administration by THE BOROUGH for the mainly environmental side and THE COUNTY for the mainly personal side. The need for local co-ordination under one Officer is necessary to ensure that the available staff and services are used to the best and most economical advantage for the people served. It is possible that in 1960 the Borough will have control of many of these County Services under the Delegation Scheme as set out in the Local Government Act, 1958.

17. THE HOME HELP SERVICE (Table 67)

This Service deserves special mention. It is an excellent example of how a sound Public Health Scheme can result in a saving of public expenditure. It provides at a comparatively reasonable cost a service at home and thus avoids the much more costly institutional care which would, in many cases, be the alternative.

18. THE SCHOOL CLINIC (Table 70)

The "School Clinic" is becoming slowly but surely the focus of all the School Health activities very much on the lines as advised by the Ministry. It is used for detailed examinations and supervision which can be better carried out there than in Schools. It is being used more and more as a place where parents, teachers and even General Practitioners can join in dealing with our common problems.

19. THE MINOR ORTHOPAEDIC CLINIC (Table 69)

This Clinic serves a most useful demand. It is not sufficiently appreciated that minor orthopaedic defects can and often do develop into major conditions. It is a fallacy to say that minor conditions generally rectify themselves. They may remain stationary. However slight the defect is, it puts an unnecessary strain on the body, wasting much energy. Early treatment is essential. One Clinic a month is insufficient. Many cases are now seen at the School Clinic to ease the situation. This has not solved the problem of the long waiting list.

20. DUTIES of a PUBLIC HEALTH DEPARTMENT

- (a) This title is not accepted everywhere or by everybody. Our outlook and sphere of activity has changed. We are becoming more interested in the strains we meet than the drains we use. Two titles which are favoured as covering our interests more clearly are "Social Medicine" and "Preventive Medicine". The World Health Organisation has defined "Health" as a combination of Physical, Mental and Social Well-being. It is the department's duty to promote health as defined here and prevent illness, where possible. Illness is any departure from the healthy state.
- (b) Preventive Medicine is not a new science or cult. Records show that it was established in many ancient civilizations. It was highly developed in India as long ago as 5,000 B.C. In early Greece it was practiced skillfully. As long ago "Before Christ" as we are now "After Christ", the Egyptians carried out wise sanitation measures to prevent diseases. For instance, they imported storks on to the banks of their rivers and canals. These birds thrived on the Bilharzia carrying snails. That tropical disease was controlled in those far off days!! The Babylonians boiled their drinking water. They preached the truth that insects spread diseases and practiced appropriate preventive measures. The Jews in their earliest days, the days of the Old Testament, knew that plague was carried by rats. Their hygiene laws, old as they are, are still standards worthy of imitation. The Romans appreciated the value of a pure water supply to a community. They built aqueducts

which are still in existence. In 500 B.C. they instituted the Aediles - Public Health Inspectors.

(c) The story of why Preventive Medicine was forgotten and neglected, and how it was revived in this country about 100 years ago, is full of interest but too long for this Report. This brief reference, however, is not out of place. Much benefit to many nations has been gained through practicing it in the past. There is a much wider field in which it can be used now to give health in its full definition to the people. Prevention is Cheaper than Cure. A well supported and encouraged Public Health Department can be of immeasurable value to every member of the community it serves.

21. HEALTH EDUCATION

A priority duty of a good Health Department is to provide suitable Health Education to the numerous groups of persons who collectively constitute the community. Each group — school children, young married women, parents, elderly people, for example — needs a different approach. Health Education is not just a poster, or a leaflet, or one talk or demonstration. It is a planned appraach to the particular group. It must hand out information as well as stimulate an interest in the "Health" problems of the group. A successful scheme produces good healthy citizens. There is very little Health Education undertaken by the Department in Gosport. We have insufficient staff for this work which the Ministry says should be "regarded as a primary activity of local authorities."

22. PRESENT STAFF - URGENT PROBLEM

I cannot do better than repeat the paragraph which appeared in my last Report.

"Gosport is growing rapidly. Public Health interests are spreading to a wider field and more legislation relevant to our duties is being passed. These are facts. The demands created cannot be satisfactorily or safely met by the PRESENT STAFF - Medical, Clerical or Inspectors. Staff should grow in some recognisable proportion to the growth of the work. This is an URGENT PROBLEM calling for early consideration."

23. CONCLUSION

It is a pleasure to express my deep appreciation to the Staff, and in particular to Mr. Cope and Mr. Moore, for their loyal and ever willing assistance in keeping this machine running.

I have the honour to be Sir, Ladies and Gentlemen,

Your obedient Servant,

Medical Officer of Health

Lavarot i Patriand

November, 1959.

STATISTICS GENERAL

Table 1 GEOGRAPHICAL INFORMATION

The Borough of Gosport covers an area of 6,185 acres.

It is peninsular; bounded on the land side by Fareham U.D.C. (to the north-west) and by the sea - the Solent (on the south-west and the south-east) and Portsmouth Harbour (on the north-east).

Its greatest length, east to west or south-east to north-west is about $4\frac{1}{2}$ miles. Its greatest breadth, north-east to south-west, is about 3 miles.

Table 2

GENERAL INFORMATION

Number of Inhabited Houses (end of 1958 according to Rate Books)......18,667 Rateable Value..... £798,236 3,229 Estimated Product of Penny Rate (Financial Year 1957-58)

Table 3 AGE and SEX DISTRIBUTION of POPULATION at Census 1951

S = Single M = Married W = Widowed D = Divorced

		Mal	es				Fen	ales			Total in
Age	S	M	W	D	Total	S	M	W	D	Total	Population
Under 1	506		-	-	506	526	-	-		526	1,032
1 - 4	2,460	-	-	-	2,460	2,414	-	-		2,414	4,874
5 - 9	2,598	-	-	-	2,598	2,345	_	-	-	2,345	4,943
10 - 14	2,034		-	-	2,034	1,835	_	-	-	1,835	3,869
15 - 19	3,230	' 26	-	-	3,256	1,682	117	-	1	1,800	5,056
20 - 29	3,185	2,483	5	6	5,689	1,163	3;066	14	9	4,252	9,941
30 - 39	494	3,505	19	36	4,054	388	3,696	108	63	4,255	8,309
40 - 49	275	3,395	51	40	3,761	296	3,215	235	48	3,794	7,555
50 - 59	192	2,352	87	20	2,651	255	2;132	409	34	2,830	5,481
60 - 69	112		187	6	1,814	239	1,376	811	6	2,432	4;246
70 - 74	34	462	111	-	607	88	337	413	2	. 840	1,447
75 - 79	15	259	122		396	58	148	304	1	511	907
80 - 84	3	77	66	1	147	25	42	184	-	251	398
85 - 89	5	23	36	-	64	16	12	92	-	120	184
90 - 94	-	2	10	-	12	1	2	19		22	34
95 & over	,-	-	-	-	-	,-	-	. 3	-	3	3
Totals	15,143	14,093	694	119	30,049	11,331	14,143	2,592	164	28,230	58,279

Previous Census Population Figures:-1931....38,443 1921....35,607

Table 4 LIVE BIRTHS and BIRTH RATE

Year	Illegi	Legitimate			Total Live	Birth Rate per 1,000 Home Population			
	M F	Total	M	F	Total	Births	GOSPORT	End & Wales	
1958	33 18	57	601 6	10	1;211	1,262	19.3	16.4	
1957	27 10	37	550 5	04	1,054	1,091	16.9	16.1	
1956	23 21	44	545 4	.96	1,041	1,085	17.0	15.6	
1955	22 24	46	559 4	45	1,004	1,050	16.8	15.0	
1954	33 20	53		.54	957	1.010	16.0	15.2	
1953	23 23	46		.85	1,009	1.055	17.6	15.5	
1952	26 33	59	1	13	1,044	1.103	18.5	15.3	
1951	19 22	41	527 4	.80	1,007	1,048	17.8	15.5	

The Gosport Birth Rate Correction Factor (1.00 for 1958) has been applied above to make the comparison on a comparable population distribution as for the whole country.

STILL BIRTHS Table 5 1958 |1957 |1956 |1955 |1954 |1953 |1952 |1951 ī 2 Illegitimate 1 1 1 28 15 Legitimate 21 27 14 21 25 30 21 28 22 26 29 Total: 14

A child which has issued forth from its mother after the twenty-eighth week of pregnancy and which did not at any time after being completely expelled from its mother breathe or show any other signs of life is said to be still-born.

	70 " " 75 " 80 " 80 " 85 " 85 " 90 " 95 "	Age at Death Under 1 yr 1 & " 5 yrs 5 " " 10 " 10 " 15 " 20 " 25 " 25 " " 30 " 25 " " 40 " 45 " 45 " 46 " " 55 " 56 " " 66 " 67 " 70 "	Table 6
522	22 22 22	No. 100 100 100 100 100 100 100 100 100 10	
100.00%	14.77% 16.28% 10.92% 7.66% 4.22%	% of Total Deaths 4.59% 39% 39% 39% 1.34% 1.15% 1.34%	DEA
		Accum 10, 24 28 28 28 28 28 28 28 28 28 28 28 28 28	DE ATHS
	60.92% 77.20% 88.12% 95.78% 100.00%	Accumulative Totals 24 4.59% 26 4.98% 28 5.36% 32 6.13% 32 6.13% 36 6.89% 38 7.28% 45 8.62% 51 9.77% 58 11.11% 80 15.32% 107 20.50% 136 35.63% 241 46.15%	in AŒ
535	20 S7	00. 87 47 40 48 81 44 46 66 47 47 48 81 48 81 49 81 40 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80 81 80	
100.00%	16.26% 17.01% 12.52% 5.98% 1.87%	7.677 1.0000 1.0000 1.0	GROUPS expr
	333 424 491 523 533 535	Accum 18 20 23 24 34 39 41 136 177 136	expressed
	62. 24% 79. 25% 91. 77% 97. 75% 99. 62% 100.00%	Accumulative Totals 18 3.36% 20 3.73% 23 4.29% 24 4.48% 29 5.42% 39 7.29% 41 7.66% 45 8.41% 9.91% 71 13.27% 91 17.01% 136 25.42% 177 33.09% 246 45.98%	ವಿ
494	25 5 1 7 6 S	5583322150 · · · · · · · · · · · · · · · · · · ·	PERCENTAGE
100.00%	13.367 15.597 10.347 8.697 2.437	Total Deaths 3.84% 41% 1.62% 1.62% 1.83% 1.01% 2.02% 3.24% 7.08% 7.08% 7.08%	NTAGE of
	311 388 439 432 494	Accum To 19 21 22 25 33 36 45 54 64 80 107 142 180	- 1 1
	62.95% 78.54% 88.88% 97.57% 100.00%	Accumulative Totals 19 3.84% 21 4.25% 24 4.86% 25 5.06% 36 7.28% 45 9.11% 50 10.12% 50 10.12% 54 10.93% 64 12.95% 80 16.19% 107 21.66% 130 36.43% 245 49.59%	TOTAL DEATHS
618]	150 157 257 2583	% No. 22 22 22 22 22 22 22 22 22 22 22 22 22	HES
100.00%	13.43% 16.18% 13.45% 7.59% 2.43% 32%	7 of Total Ac Deaths 6.15% 6.15% 1.4	70
	371 471 601 616 618	Accumu Tot 170 43 43 443 443 443 443 443 443 443 443	n 0
	60.037 76.217 89.667 97.257 99.687	Accumulative Totals Totals 38 6.15% 42 6.80% 43 6.96% 43 6.96% 47 7.60% 50 8.09% 50 8.41% 61 9.87% 70 11.32% 89 14.40% 117 18.93% 155 25.08% 228 36.89% 288 46.60%	

	,		1958			1957	
Age at Death	Number of Deaths	М	F	Accumulative Total	М	F	Accumulative Total
0 - 4 Weeks	normannamannamanna ffffffff	16	9	25	11	1.	15
1-11 Mths	normanianian fff	10	3	38	2	2	19
1	m	1		39		<i>م</i>	19
2	f		1	40	1	J	21
3	mm .	2		42			21
4				42			21
5-9	m	1		43		3	24
10-14				43		1	25
15-19	m f	1	1	45	7	1	33
20-24	m f	1	1	47	3		36
25-29	mm f	2	1	50	5	4	45
30-34	m f	1	1	52	2	3	50
35-39	mmmm fffff	4	5	61	1	3	54
40-44	mnram fffff	4	5	70	6	4	64
45-49	nmnnnnnnnnm ffffff	12	7	89	8	8	80
50-54	nmmnummunummunumm ffffffff	18	10	117	14	13	107
55-59	nmmnummummummummummummummummummummummumm	27	11	155	26	9	142
60-64	mnonnumcommunumumumumumumumumumumumumumumumumumu	50	23	228	27	11	180
65-69	nammanamanamanammanammanammanammanamma	32	28	288	48	17	245
70-74	nnamummannummummannummummummannummannumm ffffffffffffffffffffffffffffffffff	38	45	371	33	33	311
75-79	mannananananananananananananananananana	45	55	471	3.8	39	388
80-84	nunmununmununmununmununmununmununmunun	45	38	554	19	32	439
85-89	mmmmmmmmmmmm fiffffffffffffffffffffffff	16	31	601	16	27	482
90-94	mmmmmm ffffffff	6	9	616	5	7	494
95 & over	m f	1	1	618			494
m = (One Male Death f = One Female Death Totals:-	333	285	618	272	222	494

		1958		1957
Cause of Death	Males	Females	Total	Total
Tuberculosis : Respiratory	4	-	4	4
Other Forms	-	-	-	2
Syphilitic Disease	-	-	-	1
Diphtheria	-	-	-	_
Whooping Cough	-		-	-
Meningococcal Infections	-	-	-	-
Acute Poliomyelitis	-	-	-	1
Measles	-	- //	-	-
Other Infective and Parasitic Diseases	70	 G	-	3
Malignant Neoplasm : Stomach Lung, Bronchus	12	8	20 26	12
Breast	24	8 2 9	9	20
Uterus		4	4	5
Other Malignant and Lymphatic Neoplasms	24	31	55	8 5 52 3 8
Leukaemia, Aleukaemia	4	2	6	3
Diabetes	i	2 2	3	8
Vascular Lesions of Nervous System	43	50	93	76
Coronary Disease, Angina	56	44	100	72
Hypertension with Heart Disease	9	7	16	15
Other Heart Disease	36	42	78	58
Other Circulatory Disease	13 .	13	26	17
Influenza	3	2	5	5
Pneumonia	18	11	29	17
Bronchitis	16	. 7	23 5 6	20
Other Diseases of Respiratory System Ulcer of Stomach and Duodenum	3 4	2 2	5	5 1
Gastritis, Enteritis and Diarrhoea	2	2	4	<u> </u>
Nephritis and Nephrosis	l ~	2	1	1 5 2 1 9 42
Hyperplasia of Prostate	6		6	2
Pregnancy, Childbirth, Abortion	_	1		î
Congenital Malformations	7	2	1 9	9
Other Defined and Ill-defined Diseases	27	32	59	42
Motor Vehicle Accidents	5	32 2 5 3	7	9
All Other Accidents	10	5	15	9 13 6
Suicide	5	3	8	6
Homicide and Operations of War	-	-	-	1
Totals All Causes	333	285	618	494

Table 9	DEATHS	and	DEATH	RATE		DEAT	HS	DEA'	TH RATE
				YEAR	A	ll Ca	uses	Per 1,000 I	Home Population
					M	F	Total	GOSPORT	Eng & Wales
				1958	333	285	618	12.5	11.7
				1957	272	222	494	10.1	11.5
				1956	286	249	535	11.1	11.7
				1955	292	230	522	10.3	11.7
				1954	268	198	466	9.1	11.3
				1953	279	245	524	10.3	11.4
				1952	276	237	513	10.2	11.3
				1951	286	287	573	11.5	12.5

The Gosport Death Rate Correction Factor (1.32 for 1958) has been applied above to make the comparison on a comparable population distribution as for the whole country.

Table 10	MATERNAL	MORTALITY	and	RATE		GOSF	ORT	Eng & Wales
						Number	Rate	Rate
					1958	1	0.78	0.43
					1957	1	0.89	0.47
					1956	Nil	Nil	0.56
					1955	Nil	Nil	0.64
					1954	2	1.93	0.69
					1953	Nil	Nil	0.76
					1952	1	0.38	0.72
					1 951	1	0.93	0.80

Table 11 INFANT MORTALITY and RATE

		No. of De	eaths under 1	Year	Infant Mortality Rate				
		Legitimate	Illegitimate	All Infants	Legitimate	Illegitimate	All Infants		
England) & Wales):	1958	-	-	16,684	-	60 -m	22.6		
11 11 11	1958 1957 1956 1955 1954 1953 1952	35 18 18 24 25 32 20 22	3 1 - 2 1 2	38 19 18 24 27 33 22 22	28.9 17.0 17.3 23.9 26.1 31.7 19.1 21.8	58.8 27.0 - 37.7 21.8 33.9	30.1 17.4 16.6 22.9 26.7 31.2 19.9 20.9		

Notes (a) Infant Mortality Rate is the number of Deaths of Infants Under
One Year of Age per 1,000 Live Births in the same category,
i.e. Legitimate, Illegitimate or "All Live Births".

⁽b) The Rate of 22.6 for England and Wales is the lowest on record.

Table 12	HEALTH	PICTURE	COMP	ARISON	1914	. – 1918 an	d 1954 - 1	1958
				Yearly Average or 5 Years 1914-1918	F	Yearly Average for 5 Years 19 54- 1958	Increase	Decrease
Population				30,590		63,450	107.42%	
Birth Rate				23.5		17.2		26.81%
Total	Live Birt	hs		721		1,099	52.42%	
Infant Morta	lity Rate			69.5		22.7		67.34%
Death Rate				14.1		10.4		26.24%
Total	Deaths			405		527	30.12%	
Deaths	Under 1 1 1 - 4 Y 5 - 14			50 32 11		25.2 2.4 3.4		49.60% 92.50% 69.09%
Total	Deaths of	Children		93		31.0		66.66%

CONTROL over INFECTIOUS and OTHER DISEASES

O O N I	ton over INTHOLIOUS and o	1 11 15 10	D 1	JEAU	<u> </u>
Table 13	INCIDENCE and DEATHS - Infectious Diseas	es			
		1	958	19	57
		Cases	Deaths	Cases	Deaths
	Acute Poliomyelitis (paralytic)	2	-	10	1
	" (non-paralytic)	-	-	14	_
	Dysentery	20		5	-
	Erysipelas	.9	-	14	-
	Food Poisoning	8		30	-
	Measles	73	_	1,143	-
	Paratyphoid Fever	-	-	i	-
	Pneumonia	15	29	40	17
	Puerperal Pyrexia	5		5	
	Scarlet Fever	28	_	7	_
	Whooping Cough	21	_	177	_
	Enteritis & Diarrhoea under 2 years	Finds	_	Τ ((_
					ר
	(not notifiable)				7
Table 14	ADMISSIONS TO INFECTIOUS DISEASES HOSPITAL				
	<u>1958</u>				

IMMUNISATION AGAINST DIPHTHERIA Table 15

COMPARISON WITH OTHER AREAS

OUR INCESSIV VIZIT OFFICE									
	Area	Population	Births	11	rimary C l Yea r No.	Course 1 - 14 Years	Total	Booster Dose All Ages	
	GOSPORT MB Aldershot MB Fareham U.D. Winchester M.B.	65,220 40;220 54,140 27,070	1,262 612 969 411	49% 47% 61% 74%	620 285 595 303	264 253 210 86	884 538 805 389	279 308 773 154	
-	Urban Areas) in County)	435,570	7,788	42%	3,258	2,963	6,221	4,837	
000	ADMIN. COUNTY) HAMPSHIRE)	732,200	12,814	43%	5,507	4,806	10,313	8,240	

Table 16 IMMUNISATION AGAINST WHOOPING COUGH

COMPARISON WITH OTHER AREAS

Area	Population	Births	it	rimary (l Year No.	Course 1 - 14 Years	Total	Booster Dose All Ages
GOSPORT MB Alders ot MB Fareham UD Winchester MB	65,220 40,220 54,140 27,070	1,262 612 969 411	50% 44% 60% 73%	634 272 577 302	256 168 175 53	890 440 752 355	279 114 415 45
Urban Areas) in County)	435,570	7,788	43%	3,323	2,590	5,913	2,082
ADMIN. COUNTY) HAMPSHIRE)	732,200	12,814	44%	5,582	4,199	9,781	3,304

Table 17 IMMUNISATIONS (Diphtheria, Whooping Cough, Tetanus)

By OPERATOR and AGE at DATE of PRIMARY COURSE or BOOSTER DOSE

					OPER	ATOR		
		,		PRIMARY			BOOSTER	
	· .	AGE	Family Doctor	Asst C.M.Os	TOTAL	Family Doctor	Asst C.M.Os	TOTAL
A. DIP	HTHERIA only	Under 1 1 to 4 5 to 14	13 8 3	28 13 -	41 21 3	3 11	- 2 5	5 16
		Total	24	41	65	14	7	21
B. DIP	H/WHOOPING COUGH	Under 1 1 to 4 5 to 14	69 48 10	2	69 50 10	36 111	17	53 111
		Total	127	2	129	147	17	164
C. DIPI	h/wh.c/tetanus	Under 1 1 to 4 5 to 14	341 125 19	169 36 -	510 161 19	18 72	2 2	20 74
		Total	485	205	690	90	4	94
D. WHO	OPING COUGH only	Under 1 1 to 4 5 to 14	7 6 1	48 5 4	55 11 5	16 2	2 1	- 18 3
		Total	14	57	71	18	3	21
	TOTAL		650	305	955	269	31	300
٠	DIPHTHERIA (ie. A + B + C)	Under 1 1 to 4 5 to 14	423 181 32	197 51 -	620 232 32	57 194	21 7	78 201
		Total	636	248	884	251	28	279
TOTALS	TOTALS WHOOPING COUGH (ie. B + C + D)		417 179 30	217 43 4	634 222 34	70 185	21 3	91 188
	TETANUS (ie. C only)		626	264	890	255	24	279
			341 125 19	169 36 -	510 161 19	18 72	2 2	20 74
		Total	485	205	690	90	4	94

Before	Year	MI	Table
ird		INDA	18

IMMUNISATIONS (Diphtheria, Whooping Gough, Tetanus)

ANALYSIS

ı

YEAR by YEAR

	1						H1		_
TOTAL	1958	1957	1956	1955	1954	1953	Before 1953	Year	IM
Primary D " W " T Booster D " W	Primary D " W Booster D " W	Primary D " W " T Booster D " W	Primary D " W " T Booster D " W	Primary D " W Booster D " W	Primary D Booster D	Primary D Booster D	Primary D Booster D	Type	MMUNISED
	\w\w\w\w\w\w\w\w\w\w\w\w\w\w\w\w\w\w\w	111	1 1 1-4	1 6 2	- 7	1 22	633 426	1944	
618 3 1 491 12	ь у у Н Н Н	וואא		1 12 4	1 11	4 29	608 428	1945	
	1 1 1 ωωμ	νων 1 Η Η	1 ++	ゃゃ	4 32	8 55	718 374	1946	
844 11 4 633 28	スピス	2 2 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			3 54	11 228	821 297	1947	
	122 567	1 1 2 2 2 1 2 2 1	- 4 27 10		14, 143	306	846 21	1948	
7 7 7 94 2	N N N	12 10 5 8 5	9 11 1 41 32	09	17 321	20 18	Н	1949	
844 61 9 456 260	777	55 3 18 6	222 27 1 143 92	P. 05	23 18	Н	ı	1950	BORN
22 22 23 23 23	0004	38 37 32 79 62	26 38 2 241 180 7	36 20 23 17	35	119	611	1951	N in YEAR
7 0 250 211 211	7 9 91 87 34	26 26 18 142 113 20	17 19 3 15 10	47 26 2 1	1	523 -	59 -	1952	AR
143 139 36	7 6 4 116 106 35	17 21 12 14 15	$\omega \omega \omega$	128 73 1	537	28 -		1953	
673 547 31 17 25	~ はけ	1 0 00	80 00 N	1 1	57 -			1954	
728 712 98 13 26	22 9	110 107 67 4 4	1 1 1	128 123 -				1955	
795 780 562		1 1 1						1956	
669 668 554 -	the same of the sa	100 96 -						1957	
144 153 114 -	144 153 114 -							1958	
10,870 P 3,290 1,461 4,	884 P 890 690				839 P	751 P	5,807 P l,		
Primary " 4,408 Boo 1,141 148	Primary	Primary 1 305 Boo 240 39	Primary	Primary 511 Boo 259	Primary D 590 Booster D	751 Primary D 659 Booster D	Primary D 1,547 Booster D		
mary D W T S Booster D W T T T T T T T T T T T T T T T T T T	D W SterD W W	W SterD T	D W T ster D	nary D ' W L Booster D	D ster D	D ster D	D ster D		
		- 15 -							

D = Immunisation against Diphtheria

sation against Diphtheria W = Immunisation against Whooping Cough T = Immunisation against Tetanus
Immunisation against Whooping Cough was only included in the Official Emmunisation Scheme from May 1955
" " " July 1956 W = Immunisation against Whooping Cough

ANNUAL RETURN for the YEAR ended 31st DECEMBER 1958

Number of Children, at 31st December 1958, who had Completed a Course of Immunisation against Diphtheria and/or Whooping Cough and/or Tetanus at Any Time between 1st January 1944 and 31st December 1958.

N.B. Records for Whooping Cough not available prior to May 1955

Tetanus

	in the period 1944-1900		Immunised (Primery or Booster)					,	in the period 1954-1958	Immunised (Primary or Booster)						
	33		oster)					TOTALS		D Whooping	C Diphther	B Diphther	A Diphtheria only			
	TOTALS		D Whooping Cough only	C Diphtheria/Whooping Cough/Tetanus	B Diphtheria/Whooping Cough	A Diphtheria only	TETANUS (ie. C only)	WHOOPING COUCH (ie. B + C + D)	DIPHTHERIA (ie. A + B + C)	D Whooping Cough only	Diphtheria/Wh.Cough/Tetanus	Diphtheria/Whooping Cough	ia only			
TETANUS	WHOOPING COUGH	DIPHTHERI (ie. // + B	h only	ooping Coug	ooping Coug	lу	711	153	144	25	111 111	14	9T	i.e. Born 1958	Under lyr	
TETANUS (ie. C only)	COUGH C + D)	DIPHTHERIA ie. 1 + B + C)		h/Tetanus	h		1,254	2,758	2,895	75	1,254	1,429	212	i.e. Born 1954-57	1 - 4 yrs	
	ł	2,914		1		2,914	216	1,385	2,943	74	216	1,095	1,632	i.e. Born 1949-53	5-9 yrs	Age at 31.12.58
1	l	5,850		1		5,850	25	136	533	5.	25	106	4,02	i.e. i.e. i.e. i.e. Born 1958 Born 1954-57 Born 1949-53 Born 1944-48	10-14 yrs	8
ı	1	8,764				8,764	1,609	4,432	6,515	179	1,609	2,644	2,262		ጥርም / ፣	and the same of th

		Prin	mary Vac	cination	Re-						
Year	Under 1	l yr	2 - 4yrs	5 - 14yrs	15+	Total	2 - 4yrs	5-14yrs	15+	Total	TOTAL
1958	(a)880	33	42	29	34	1,018	15	60	152	227	1,245
1957	(b)827	42	54	68	57	1,048	13	හ	173	266	1,314
1956	(c)758	29	48	32	28	895	16	54	112	182	1,077
1955	(d)663	38	40	27	49	817	13	41	127	181	998
1954	(e)623	43	40	28	36	770	6	53	139	198	968

(a) = 69.7% of Potential (1,262 births) (d) = 63.1% of Potential (1,050 births) (b) = 75.8% " " (1,091 ") (e) = 61.7% " " (1,010 ") (c) = 69.9% " " (1,085 ")

	Year						
Total Vaccinations & Re-Vaccinations	1955	1956	1957	1958			
By General Practitioners At Child Welfare Centres	936 62	846 231	988 326	960 285			
Totals	998	1,077	1,314	1,245			

NOTE: Vaccination at C.W.Cs commenced in September 1955

Table 21 VACCINATION against SMALLPOX - COMPARISON with OTHER AREAS

	Pr	imary V	lacci	ination	s	Re	tions		
	Under %	l Year No.		After 2 yrs	Total	Under 15 yrs	After 15 yrs	Total	TOTAL
GOSPORT Aldershot Fareham Winchester	69.7 68.0 72.2 64.7	880 416 700 266	33 27 23 11	105 100 80 40	1018 543 803 317	75 121 78 46	152 185 161 110	227 306 239 156	1245 849 1042 473
County) Urban Areas)	69.8	5440	202	802	6444	732	1396	2128	8572
Admin. County) Hampshire	67.8	8687	320	1233	10240	980	2179	3159	13399

Note: The No. of babies vaccinated before their first birthday is shown in the first column as a percentage of the potential, that is of the No. of babies born in the period.

Table 22 VACCINATION against SMALLPOX - COMPARISON with OTHER AREAS

Babies (under 12 months) Vaccinated in Hampshire
Expressed as a Percentage of Live Births

	Area	1956 %	19 57 %	1958 %
Urban Areas:	Aldershot M.B. Alton U.D. Andover M.B. Basingstoke M.B. Christchurch M.B. Eastleigh M.B. Fareham U.D. Farnborough U.D. Fleet U.D.	68.8 48.6 52.8 60.4 63.2 57.2 59.3 58.8 54.6	61.3 45.4 63.3 69.5 62.7 62.2 70.4 83.4 67.5	68.0 53.9 55.3 78.7 61.6 64.7 72.2 73.3 66.0
	GOSPORT	69.9	75.8	69.7
	Havant & Waterloo U.D. Lymington M.B. Petersfield U.D. Romsey M.B. Winchester City	62.6 74.5 58.2 42.7 59.7	74.3 73.5 80.2 77.5 69.1	74.7 79.1 63.4 63.8 64.7
	URBAN AREAS in HAMPSHIRE	61.6	70.3	69.8
AVERAGE for	RURAL AREAS in HAMPSHIRE	58.2	65.8	64.6
AVERAGE	for COUNTY of HAMPSHIRE	60.2	68.5	67.8

Until September 1958 the Scheme continued to operate as at the end of 1957, viz. by Registration through the County Medical Officer for Children born on or after 1st January 1943, for Expectant Mothers and for Special Classes (doctors, hospital staff, etc). Vaccinations continued to be carried out by family doctors and at the Gosport Health Clinic.

In October 1958 the Scheme was re-organised and extended as follows:-

- (i) Registration through the C.M.O. was discontinued and registrations accepted at the Health Department, at Child Welfare Centres and by Family Doctors.
- (ii) The Age Group was extended to all persons born on or after 1st January 1933.
- (iii) Where applicable, vaccination was offered at Child Welfare Centres.
 (iv) A third injection (at least seven months after the second) was introduced.

Supplies of Vaccine (except British vaccine) became more plentiful and, by the end of 1958, the following persons in the Borough had been vaccinated:-

Completed	Completed
SECOND Injection	THIRD Injection
7,331	168
63	-
235	-
36	3
13	-
7,678	171
	7,331 63 235 36 13

Table 24 TUBERCULOSIS -THE REGISTER

		On egiste 1957	er 1956	Ches	tendi: st Cl: 1957	inic	Admitted To Sanatoria 1958 1957 1956		
Pulmonary									
Adult Males	371	352	348	312	299	283	18	21	31
" Females	280	230	266	217	223	206	12	6	14
Children	36	34	37	22	25	34_	3	nadi Projektypi nadimije - a	1
Total	687	666	651	551	547	523	33	27	46
Non-Pulmonary									
Adult Males	38	34	29	17	23	18	1	3	-
" Females	48	49	46	27	28	26	-	1	1
Children	15	18	21	4	5	9	-		5
Total	101	101	96	48	56	53	1	4	6
TOTAL (All Cases)	788	767	747	599	603	576	34	31	52

TUBERCULOSIS - AGE & SEX DISTRIBUTION (New Cases/Deaths/Register) Table 25

100010010	Tobalico Doble - Rob & Dan Diolitabolion (New Oases) Deading (teglisor)										
	New	Cases	De	aths	19	n Register d of year					
	Pulm	Non-Pulm	Pulm	Non-Pulm	Pulm	Non-Pulm					
	M F M F		M F	M F	M F	M F					
Under 5 Years 5 - 14 " 15 - 24 " 25 - 44 " 45 - 64 " 65 yrs & over	1 4 5 18 4 13 5 2 1	2 3 1	4		2 12 41 41 157 152 5	14 25					
Totals	38 15	3 3	4 -		396 29:	1 47 54					
Totals for 1958	53 5	6	4	4	687	101 7 88					
Totals for 1957	32 3	7	4	6	666	101 767					
Totals for 1956	42 4	7 .9	4	4	651	96 747					
Totals for 1955	69 7	7 .	2	- . 2	646	91 737					
Totals for 1954	. 48 · 5	g 6	7	3 10 ·	613	86 699					
Totals for 1953	86	12 13	7.	9	578 (83 661					
		70									

Table	26	TUBERCULOSIS .	- DEATH RATE	
	Year	GOSPORT	Eng & Wales	
	.1958	0.06	0.09	
	1957	0.12	0.11	
	1956	0.08	0.12	Note - Death rates are Deaths from
	1955	0.04	0.15	all forms of Tuberculosis per
	1954	0.16	0.18	1,000 population, corrected -
	1953	0.18	0.20	for Gosport - by our population
P	1952	0.18	0.24	factor
	1951	0.22	0.31	
	1950	0.32	0.36	
	1949	0.54	0.45	

Table 27 TUBERCULOSIS - NOTIFICATIONS of RESPIRATORY TUBERCULOSIS (All Ages)

COMPARISON with OTHER AREAS

	1958		1958 1957		19	1956		55	1954		1953	
	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per o000 Pop.	No.	Rate per 1000 Pop.
GOSPORT	* 53	0.81	32	0.49	* 42	0.66	69	1.11	48	0.77	* 86	1.36
Hants County (incl.Gosport but excluding Portsmouth, Southampton & Bournemouth)	324	0.44	336	0.47	415	0.64	399	0.58	426	0.64	535	0.79
Portsmouth	107	0.48	125	0.55	143	0.80	160	0.67	194	0.80	252	1.02
Southampton	133	0.67	171	0.87	210	1.29	292	1.49	250	1.28	262	1.48
Bournemouth	110	0.76	114	0.79	107	0.96	117	0.82	136	0.96	98	0.70
Western Area of S.W.M.R. Hosp. Board (i.e. Hants, Dorset, Wilts and I.O.W.)	888	0.42	1007	0.57	1137	0.73	1202	0.69	1268	0.73	1418	0.82

^{* =} Mass Radiography Unit visited Gosport in these years.

Table 28 BACTERIOLOGICAL EXAMINATIONS for CONTROL of INFECTIOUS DISEASES

FOOD POISONING Faeces (Suspected Cases 4 - 4 21 - 21	<u> </u>	DAOTEILIODOGIOA	TI TIMMITIVALE	OIVO	101	CONTITOD OF	ZIVI DOL.	<u> </u>	
Faeces (Cases) 10					Total				
DYSENTERY Faeces (Cases)				10		_		10	
DYSENTERY Faeces (Cases)				2	٦.	_		2	٦ /.
" (Suspected Cases) 3 - 3 34 69 " (Contacts) 40 88 Sh.Sonnei 6 25 34 69 FOOD POISONING Faeces (Suspected Cases 4 - 4 21 - 21 Meat Pie 1 - 1 Cl.Welchi 1 - 1 Rissole 1 Cl.Welchi 1 - 2 " Peas 2 31 - 1 2 30 PARA-TYPHOID B Faeces (Carriers) following Sewer Swabs 6 6 Type 1 2 2 4 12 POLIOMYELITIS Faeces (Suspected Case) 3 - 3	-		**************************************	<u>~</u>				~~~	-1-44
" (Contacts) 40 88 Sh.Sonnei 6 25 34 69 FOOD POISONING Faeces (Suspected Cases 4 - 4 - 21 - 21 - 21 - 21 - 1 - 1 - 1 - 1 - 1		· · · · · · · · · · · · · · · · · · ·	Canan			Sh.Sonnei 1	9		
Faeces (Suspected Cases 4 - 4 - 21 - 21 - 21 - 21 - 21 - 1 - 1 - 1 -		" (Contacts)	Cases)	_	88	Sh.Sonnei	6 25	_	63
" (Contacts) 21 — 21 Meat Pie 1 — 1 Rissole 1 Cl.Welchi 1 — Tinned Crab 2 — 2 " Peas 2 31 — 1 2 PARA-TYPHOID B — 1 2 3 Faeces (Carriers) following Sewer Swabs 6 6 Type 1 2 2 4 1 POLIOMYELITIS — 3 — 3			Chaea	1.		_		J.	
Rissole Tinned Crab Peas Peas PARA-TYPHOID B Faeces (Carriers) following Sewer Swabs 6 6 Type 1 2 2 4 1 POLIOMYELITIS Faeces (Suspected Case) 3 - 3		" (Contacts)	02505			_			
PARA-TYPHOID B Faeces (Carriers) following Sewer Swabs 6 6 Type 1 2 2 4 1 POLIOMYELITIS Faeces (Suspected Case) 3 - 3				1		Cl.Welchi	l		
PARA-TYPHOID B Faeces (Carriers) following Sewer Swabs 6 6 Type 1 2 2 4 1 POLIOMYELITIS Faeces (Suspected Case) 3 - 3				2	31		٦	2 2	30
Sewer Swabs 6 6 Type 1 2 2 4 1 POLIOMYELITIS Faeces (Suspected Case) 3 - 3	ı								
POLIOMYELITIS Faeces (Suspected Case) 3 - 3		Faeces (Carriers)		6	6	Type 1	2 2	4	4
(Contacts) 3 6 3 6		Faeces (Suspected (Contacts)	Case)	3	6	-		3 3	6
TOTALS 145 28 117		TOTALS			145		28		117

SANITATION and GENERAL SERVICES

Table 29 WATER - Public Supply

The main supply is a typical chalk water remaining practically constant in quality, neutral in reaction and free from deposit on standing. It has no plumbosolvent action. It is hard in character but is much softened on boiling. The water is chlorinated before it reaches the mains.

The supply has been satisfactory in quality and quantity.

The following table shows the number of samples taken during the year. The results of analysis were all satisfactory:-

	Chem.Exam	Bact.Exam	Total
Water from Public Supply Mains	4	46	50
Water before chlorination	3	17	20

No action in respect of any form of contamination was required during the year. So far as it is known all except one of the dwelling houses in the borough have direct main supplies.

Table 30 DRAINAGE and SEWERAGE

The following additional lengths of sewers were laid in the borough during the year:-

		Council & Admiralty Estates yards	Private Estates yards
Foul Sewers	4" 6" 9"	208 860 294	1380 1800 280
Surface Water Sewers	6" 9" 12"	104 97	370 600 220

Table 31 SHORE POLLUTION INVESTIGATION

Foreshore

3 samples of seawater were taken. All showed high coliform and faecal colicounts.

6 samples of sand were taken from that part of the beach uncovered at low tide. No pathogenic organisms were found.

samples of mussels were taken from an area uncovered only at very low tide. Both samples showed heavy contamination by faecal coli and Para. B. was isolated in one sample.

Moat at Stokes Bay

4 samples of water were taken and none of these showed heavy bacteriological contamination.

l sample was submitted for chemical analysis. This showed organic pollution which could have arisen from seepage from the refuse with which part of the moat had already been filled.

All the samples were taken following complaints of obnoxious smells from the moat.

River Alver

A complaint was received of the presence in the river at its seaward end of large numbers of dead fish. Investigations were made immediately and I formed the opinion that the fish had died from lack of oxygen in the water. A sample of water was submitted for chemical analysis and the report on this confirmed that it was very deficient in oxygen. A meeting was arranged with a representative of the Hampshire Rivers Board and the problem discussed. It was thought likely that the oxygen in the water had been absorbed by some material which had entered the water either as a result of unauthorised dumping or had been washed in by rain from the adjacent refuse tip.

River Alver (continued)

2 samples of water submitted for bacteriological examination showed heavy contamination.

3 further samples were taken for chemical analysis at various points on the river and these showed that the source of the trouble was well above the tip.

Further investigations were made but it was not possible to find the origin of the trouble which by then had disappeared. No more complaints were received.

Storm/Surface Water Outfall. Stokes Bay

l sample of water was taken and this showed an improvement on previous samples. Questionable water had been cut off since those were taken.

SWIMMING BATHS and POOLS Table 32

103 visits were made in this section of the work.

The Gosport bath is equipped with a filtration and chlorination plant. Regular checks were made on the chlorine content. 4 samples were taken and all were satisfactory.

The Swimming and Paddling Pools at Lee on the Solent are not equipped with a filtration or chlorination plant. There is no continuous flow. Mains water was used throughout the season and additional chlorine was provided by adding manually to the water a proprietary liquid prepared for this purpose.

20 samples were taken, of which 14 were reported as satisfactory by the Public Health Laboratory, 4 suspicious and 2 unsatisfactory.

CLOSET ACCOMMODATION Table 33

There were no conversions of pail closets to water closets during the year.

Number of water closets.....20,900 Number of pail closets.....ll

PUBLIC CLEANSING Table 34

Household refuse is collected once weekly by the Corporation. Emptying of cesspools is carried out by Hants Cleansing Service under contract.

CAMPING SITES

The only camping site in the Borough is that at Stokes Bay owned and administered by the Council. Inspections were made from time to time. Conditions were found to be satisfactory.

Table 36 SMOKE ABATEMENT

The provisions of the Clean Air Act 1956 relating to the emission of dark smoke, grit and dust from railways, vessels and industrial installations came into force in June, 1958. Contact was made with those factories in the Borough which came within the scope of those provisions. All boiler installations are capable of complying with the requirements of the Act if used properly.

In addition, visits were paid to all the Admiralty Establishments at the request of the officers in charge and advice given where necessary.

Complaints were received from time to time of excessive smoke from factory chimneys but on no occasions were emissions seen that contravened the standards laid down in the Act. It did show however that the public was alive to the problem.

The emission of foul, black exhaust gases by heavy road vehicles was also the subject of complaint and the attention of those responsible was drawn to the matter.

Table 37 DISINFECTION and DISINFESTATION

39 premises were disinfested for Bugs and/or Fleas during the year. The arrangements made in 1956 whereby Haslar Hospital kindly undertook the disinfection by steam of infected bedding and clothes still holds good and has proved of great value to the work of the department.

Table 38 RODENT CONTROL - GENERAL

Except when carrying out duties as Mortuary Attendant or Disinfector, two men are employed on Rodent Control. The following work was done during the year:-

<u>1958 (1957)</u> <u>1958 (1957)</u>

The increased number of inspections and revisits resulted from "block control" whereby premises in the immediate vicinity of a reported infestation are checked so that the limits of the infestation may be found and effective treatment of the area carried out.

Table 39 RODENT CONTROL - SEWERS

Casual labour was employed when required for lifting of manhole covers etc.

Sewers in the borough are divided into sections and maintenance treatments were carried out during the year with very satisfactory results.

Table 40 MOSQUITO CONTROL

The very wet summer of 1958 resulted in a great increase in the number of mosquitoes. While every effort was made to deal with the problem, this was aggravated by the mass breeding taking place in areas not under the control of the Local Authority and also in private gardens.

Discussions took place during the year and further progress made in the filling-in of low-lying areas both by Service Departments and by the Borough Engineer's Department. A lot of work remains to be done but the situation should improve progressively.

The use of a dispersible powder mixed with water for spraying was continued and gave good results when weather conditions were favourable. The mosquito control operator carried out extensive investigations to find the sources and gave advice to many householders.

Table 41 PUBLIC CONVENIENCES

There are now 19 Public Conveniences in the Borough. They are administered by the Public Health Department through a special Sub-Committee.

The Conveniences have again suffered much wanton damage. The cost of replacements and repair was considerable.

Part-time cleaners are employed for all Conveniences except the Ferry Gardens (Ladies) where there is a full-time attendant.

Further discussions took place during the year on the siting of proposed new Conveniences. Work was started on the new Convenience at Marine Parade West, Lee-on-the-Solent.

Table 42 FACTORIES ACTS 1937 and 1948

A_{\bullet}	INSPECTIONS for purposes of PROVIS	SIONS as	to HEALTH		
	Premises	No. on Register	Inspections	Written Notices	Occupiers Prosecuted
	Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities	17	32	1	-
	Factories not included in (1) in which Sect.7 is enforced by the Local Authority	100	143	2	-

3. Other Premises in which Section 7 is enforced by L.A. (excluding Outworkers)

TOTAL

100

143

2

143

2

143

2

143

2

143

2

143

3

101

121

178

3

Nil

B. <u>CASES in which DEFECTS</u> were F	OUND				
· Particulars		ects Remedied	to	rred by H.M.I.	Prosecutions Instituted
Want of Cleanliness (Sect. 1)	3	4	-	-	-
Overcrowding (Sect. 2)	-	-			-
Unreasonable Temperature (Sect. 3)	_	-			-
Inadequate Ventilation (Sect. 4)	-	-	-	-	-
Ineffective Drainage of Floors (Sect. 6)	-	-	-	-	-
Sanitary Conveniences (Sect. 7):-					
(a) Insufficient	1	1	-		-
(b) Unsuitable or Defective	14	13	-	-	
(c) Not separate for sexes	-	-	-	-	, -
Other Offences against the Act					
(excluding offences relating to outwork)	1	1	-	-	-
TOTAL	19	19	_	-	Nil

FACTORIES ACTS 1937 and 1948 (continued) Table 42 OUTWORK 110 and 111) (Sections Section 110 Section 111 Out-Cases of Prosecu-Work in Notices workers default tions for Proseunwhole-Nature of Work in in sending failure Served cutions wome August Lists to to supply Premises List the Council Lists Wearing Apparel - Making etc 24 WORK of PUBLIC HEALTH INSPECTORS - GENERAL SANITATION Table 43 VISITS and INSPECTIONS A. Under the Public Health Acts 811 Dwelling Houses 425 Complaints 285 Drainage 2 Offensive Trades 24 Tents, Vans and Sheds Stables and Piggeries 182 98 Offensive Accumulations and Refuse Disposal 49 Mosquito Control 47 Verminous Premises Re-Visits to Premises under Notice 823 33 Atmospheric Pollution 21 Cesspools and Ditches Houseboats 22 Cinemas 2,828 B. Under Infectious Diseases Legislation Visits and Re-Visits to Cases of Infectious Disease 640 640 C. Under the Factories Acts Visits to Factories (Power) 148 178 (Non-power) 30 D. Under Public Conveniences Control Duties Maintenance Supervision visits 1,470 1,470 E. Under Rodent Control Duties Visits - exclusive of those made by 270 270 Rodent Operator and reported elsewhere F. Under the Pet Animals Act 1951 17 17 Inspections and Re-Inspections of Premises G. Gosport Swimming Baths & Lee Swimming Bath & Paddling Pool Visits re Water Supplies 103 103 25 25 H. Shore Pollution I. Interviews with Owners, Agents, Builders etc. 637 637 J. Other Visits not detailed above Public Health Laboratory and Public Analyst 40 Westfield Road Depot re choked sewers etc. 39 St. Matthew's Yard Delivering Statutory Notices or to Post Office for

Complaints which, upon visit, did not come within

Various departments at Town Hall and Portland Place

K. Miscellaneous Visits - not included above

Requests to Call - found to be made to wrong department

despatch by registered post

scope of department

3

61

12

36

23

198

23

6,389

Cable 44 SUMMA	RY OF SANITARY WORK	CARRI	ED OUT (After Representation by this Department	t)
<u>Houses</u>	Roofs Walls (external) Chimneys and Stacks Rainwater Pipes Eaves Guttering Yards and Passages Dampness Abated Wallplaster Ceilings	11 25 6	Windows Sashcords Floors Doors Vermin & Cleansed Fireplaces Sinks (Repair or Renewal) Sink Waste Pipes	85 39 25 46 19 16 7
Drainage	Drains Cleared " Repaired	135 36	Other Defects	6
Water Closets	New Pans Provided ** Seats ***		New Cisterns Provided Repaired	8
Contraventions	Food Premises Stables and Piggeries	83 37	Factories Other Premises	9 2
·	Total De	fects	Remedied: 989	
able 45 NOTICE	<u>ES</u>			
Informal No	m F	ood an	Health Acts 281 d Drugs Act 63 es Acts 9	
			Total: 353	
Statutory I	Notices Served		. 32	
Notices Con	mplied With		384	
able 46 SHOPS	ACT and YOUNG PERS	ONS (E	mployment) ACT	
	Visits Made Informal Notices Serve " " Compl Statutory Notices Serv	ied wi	2,367 4 th 4 Nil	

SECTION E

HOUSING

Table 47 INSPECTION of DWELLING HOUSES during the YEAR	
l(a) Total Number of Dwelling Houses Inspected for Housing Defects	
(under the Public Health or Housing Acts)	750
	L,286
2(a) Number of Dwelling Houses (included under Sub-head 1 above) which were	
Inspected and Recorded under Housing Consolidation Regulations 1925 & 1932	192
(b) Number of Inspections made for the purpose	311
3. Number of Dwelling Houses found to be in a state so Dangerous or	
Injurious to Health as to be Unfit for Human Habitation	80
4. Number of Dwelling Houses (exclusive of those referred to under the pre-	
ceeding Sub-head) Not Reasonably Fit for Human Habitation in all respects	187
Table 48 REMEDY of DEFECTS during the YEAR - WITHOUT SERVICE OF FORMAL NOT	ICES

Number of Defective Dwelling Houses rendered Fit in consequence of Informal Action by the Local Authority or their officers 203

<u>Τ</u> ε	able 49 ACTION under STATUTORY POWERS during the YEAR	
Α.	Proceedings under Sections 9, 10 and 16 of the Housing Act 1936 and/or 9, 10 and 12 " " 1957	Nil
В.	. Proceedings under Public Health Acts:-	
	1. Number of Dwelling Houses in respect of which Notices were Served requiring Defects to be Remedied	32
	2. Number of Dwelling Houses in which Defects were remedied after Service of Formal Notices:- (a) By Owners (b) By Local Authority in default of Owners	40 Nil
~		
С.	Proceedings under Sections 11 and 13 of the Housing Act 1936 and/or " 16 and 17 " " " 1957 and/or " 10 and 11 " " Local Government (Miscellaneous Provisions) Act 1953:-	
	1. Number of Dwelling Houses in respect of which Demolition Orders were made 2. " " " " Closing Orders " " " " " Undertakings were Accepted	13 24 3
D.	Proceedings under Sections 25-29 of the Housing Act 1936 and/or " 42-46 " " " 1957:-	
	1. Number of Clearance Orders made 2. " Areas contained in above Orders 3. " Dwelling Houses Confirmed as Unfit in above Orders	4 7 21
Ta	able 50 HOUSING ACTS 1936 & 1957 - PART IV - OVERCROWDING	
	A. l. Number of Overcrowded Dwellings on our Register at the end of the year 2. " "Families dwelling therein 3. " "Persons dwelling therein	3 5 21.
	B Number of New Cases of Overcrowding reported during the year	1
		٦-
	C 1. Number of Cases of Overcrowding relieved during the year 2. " Persons concerned in such cases	6
	D. Particulars of any cases in which dwellings have again become Overcrowded after the Local Authority have taken steps for the abatement of overcrowding	
Ta	able 51 SLUM CLEARANCE - POSITION at 31st DECEMBER 1958	
	Total Number of Houses Demolished	449
Ta	1958 Pos	otal t-War
	New Houses Built Permanent (By Local Authority) 175) (By Private Enterprise) 104) (By Admiralty) 201) 4	,940
	Temporary (Prefab. by Local Authority) -	600
	War Destroyed Houses Re-Built -	170
Ta	ble 53 ESTIMATED CONDITION of HOUSING (As at 31st December 1958)	
	Group B. Unfit Houses - for Closure or Demolition	,112
	(cannot be made fit for human habitation at a reasonable expense Group C. Good Houses	79
	(unsuitable as modern homes; require improvement or conversion) 2 Group D. Unfit Houses	,043
Та	(can be made fit for human habitation at a reasonable cost) luble 54 WORK of PUBLIC HEALTH INSPECTORS - HOUSING DUTIES	,248
	(Not Recorded Elsewhere)	
	Inspections:- Overcrowding 14 Houses-let-in-Lodgings 2 Applications for Council Houses 25	
	Improvement Grant Investigations 21 62	
	- 25 - 62	

Table 55 THE RENT ACT 1957

Many houses, particularly the smaller controlled ones, received attention by owners during the year. This was reflected by a corresponding decrease in the number of housing complaints. Only a very small proportion of those tenants affected by the Rent Act made applications for Certificates under it but many more tenants and owners made enquiries as to the implication of the Act.

The following table shows the action taken under the Act during 1958:-

		API	PLICATIONS for CERTIFICATES of DISREPAIR					
ı.	Number	of	Applications for Certificates	80				
2.	Ħ	Ħ	Decisions Not to Issue Certificates	-				
3.	tt	Ħ	Decisions to Issue Certificates (a) in respect of some but not all defects (b) " " all defects	32 48				
4.	11.	11	Undertakings given by Landlords under para.5 of the First Schedule	34				
5.	11	11	Undertakings refused by Local Authority under proviso to para.5 of the First Schedule	Nil				
6.	11	11	Certificates Issued	52				
	<u>J</u>	APPI	LICATIONS for CANCELLATION of CERTIFICATES					
7.	7. Applications by Landlords to Local Authority for Cancellation of Certificates 9							
8.	3. Objections by Tenants to Cancellation of Certificates -							
9.	Decisio	ons	by Local Authority to Cancel in Spite of Tenants! Objection	_				
10.	Certifi	Lcat	ces Cancelled by Local Authority	9				

284 Visits were Paid in Connection with this Work.

SECTION F

INSPECTION and SUPERVISION of FOOD

Table 56 MILK SAMPLING

Testing to note compliance with Milk (Special Designations) (Raw Milk) Regulations 1949 and

Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations 1949

Class of Milk	Number of Samples	Tests	Number of Samples		
032,000 01 111111	Examined	10505	Passed	Failed	
Pasteurised	82	Phosphatase Methylene Blue	81. 82	1.	
T.T. Pasteurised	ı	Phosphatase Methylene Blue	1	-	

Phosphatase Test is for Adequacy of Heat Treatment Methylene Blue Test is for Keeping Quality and Bacterial Count

REGISTRATIONS (MILK CONTROL) Table 57

Under Milk and Dairies Regulations 1949:-

Dairies (other than dairy farms)

Distributors

6

Table 58		LICENCE	ES	(MILK	C	ONTROL)				
	(a)	Under N	Milk	(S.D.))(P	& S.M)	Regulation	ns 1949:-		
							Pasteuri	sers		2
							Dealers	(Pasteurised)		5
							11	tt.	Supplementary	1
							H-	(Sterilised)		5

Supplementary (b) Under Milk (S.D.) (R.M) Regulations 1949:-Dealers (Tuberculin Tested) 6 1 Supplementary

MEAT and OTHER FOODS - CONDEMNATIONS Table 59

136 lbs. Beef, 407 lbs. Bacon, 25 lbs. Lamb, 63 lbs. Pigs Liver (Imported) and 79 lbs. Pigs Plucks (Imported) were condemned.

Other foodstuffs condemned as unfit for human consumption were as follows:-

Government Victualling Establishment

Beef Extract	57 jars	Tinned	Apple Puddings	60 -	tins
Biscuits	170 lbs.	11	Bacon	559	11
Chocolate	431 "	11	Beans	881	11
Dried Beans	104 "	11	Butter	97	11
" Fruit	1,056 "	tt	Cheese	272	11
" Peas	344 "	11	Fish	508	11
" Vegetables	930 "	11	Fruit	1,656	11
Flour	54 "	11	Ham and Eggs	•	11
Hamburghers	47	11	Margarine	68	11-
Jam & Marmalade	18 "	11	Meat	2,947	11
Lard	5 "	11	Meat & Vegetables	6,368	11
Oatmeal	57 "	11	Milk	1,799	11
Rice	1,025 "	11	Rice Puddings	97	11
Split Peas	3,420 "	116	Sausages	1,376	11
Steak and Kidney Pudding	12 "	11	Soup	1,503	11
Sweets	269 pkts	11	Tomatoes	615	11
Tea	4 lbs.	11	Vegetables	2,041	11
	Others				

Biscuits	6	lbs.	Turkey		25	lbs
Cake	32	11	Tinned	Chicken	5	tins
Cabbage	1,372	11	Ħ	Coffee and Chicory	5	11
Cheese	61	11	Ħ	Cream	1	tin
Chicken	50	11	TI.	Fish	33	tins
Fish	92	11	11	Fruit	492	
Fruit Pulp	70	11.	11	Meat	349	
Grapes	10	11	11	Milk	58	
Ham	114	11	11	Preserves	3	11
Pickled Cabbage	34	jars	11	Rice Puddings	3	
Pork (Roast)	25	lbs.	11	Sausages	2	11
Prawns	8	11:	11	Soup	61	11
Relish	2	bots	TT .	Tomatoes	225	11
Sauce	4	11	11	Vegetables	9	11
Sausages		lbs	Ħ	Baked Beans	27	TI:

Table 60

FOOD & DRUG SAMPLES.

Taken under Sale of Food & Drugs Act 1955

			Genuine		Unsatisfactory			Total		
		Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
M	ilk	16	68	84.	_	3(a)	3	16	7/1萬	87
	ther oods	5	90	95	1	10(b)	10	5	100	105
D:	rugs		וו	11	-	4(c)	4	-	15	15
T	OTAL	21	169	190	-	17	17	21	186	207

Table 6	0 FOOD & I	DRUG SAMPLES (Continued)	
	ACT	TION TAKEN re UNSÄTISFACTORY SA	MFLES:-
(a)(i)	Milk .	Deficient of 3.3% of minimum limit of milk fat.	Follow-up samples satisfactory.
(ii)	Channel Island Milk	Deficient of 2.5% of minimum standard of milk fat for Channel Island Milk.	Follow-up samples satisfactory.
(iii)	Milk	Deficient of 13% of minimum limit of milk fat.	Follow-up samples satisfactory.
(b)(i)	Non-Alcoholic Tomato Juice Cocktail	Label Offence. Vitamin B content declared as Inter-national Units instead of milligrams.	Very old stock. Labels of new stock satisfactorily amended.
(ii)	Jellied Pork (Canned)	Label Offence. Ingredients not given in the order of proportion by weight.	Manufacturer written.
(iii)	Apples	Arsenic 1.1, 1.5, 1.6 p.p.m Lead 5, 5, 6 p.p.m Arsenic and Lead present in excess of the F.S.C. recommended limits.	Samples taken after report received from port of landing of Lebanese Apples. Retailers and general public advised.
(iv)	Lemon Juice	Label Offence. The words "Lemon Juice" only appear embossed in small type.	Manufacturer advised.
(v)	Cream	Label Offence. The list of ingredients included the generic description "Vegetable Stabiliser". A specific description should be used for this ingredient.	Manufacturer agreed to amend Label.
(vi)	Fresh Grated Cheese	Misleading description.	Vendor warned.
(vii)	Vienna Sausage (Canned)	Misleading description. "Vienna Sausages" implies a Continental sausage containing 80% pork.	Manufacturer agreed to amend Label.
(viii)	Foam Crystals	Label Offence. The ingredient "edible gum" should be given the specific description which identifies the gum used.	Manufacturer agreed to amend Label.
(ix)	Plain Flour	Deficient of 32% of the minimum amount of calcium carbonate	Follow-up sample satisfactory.
(x)	Non-Alcoholic Orange Flavour Wine	Label Offence. Appropriate description is "Orange Flavour Cordial (Ready to Drink)"	Manufacturer agreed to amend Label as recommende
(c)(i)	Vita Glucose Tablets	Label Offence. Description "Vita Glucose" implies that one or more Vitamins are present.	Manufacturer agreed to amend label.
(ii)	Ammoniated Tincture of Quinine	Deficient of 41% of the minimum amount of ammonia prescribed by the B.P.C.	Old stock. Remainder destroyed.
(iii)	Codeine Tablets	Label Offence. "Compound Tablets of Codeine B.P.C." The preparation should be labelled B.P.	Label correctly amended.
(iv)	Ammonia ted Tincture of Quinine	Deficient of 8% of the minimum amount of Ammonia prescribed by the B.P.C.	Retailer warned.

Table 61 ICE CREAM - REGISTRATION of PREMISES

For Manufacture and Sale 1
For Sale only 198

Table 62 ICE CREAM - SAMPLING

	No.of Samples		Samples H	Reported		% in	% in Grades	% in	% in
		Grade 1	Grade 2	Grade 3	Grade 4	Grade 1	1 or 2	Grade	3 Grade 4
1958	55	53	Nil	1	1	96%	96%	2%	2%
1957	47	42	4	1	Nil	89%	98%	2%	Nil

The Public Health Laboratory Service advises that samples should be judged on results of a series and suggests that over a siz-monthly period

50% of Samples should fall into Grade 1 80% " " " " Grades 1 or 2

Not more than 20% " " " Grade 3 and no " " " Grade 4

The two samples reported as Grade 3 and Grade 4 were taken from the same premises.

In addition 47 Iced Lolly Samples were examined; all except 3 were satisfactory.

In all cases of unsatisfactory reports the manufacturer and the retailer were advised re precautions to be taken to prevent contamination. In one case the retailer was summoned for failing to take all reasonable precautions against contamination.

Table 63 WORK of PUBLIC HEALTH INSPECTORS - FOOD CONTROL DUTIES

VISITS and INSPECTIONS

A. Inspections of Premises	Bakehouses Butchers Shops Fishmongers and Poulterers Greengrocers and Fruiterers Grocers and Other Food Shops Food Preparing Premises Dairies and Milkshops Ice Cream Premises Preserved Food Premises Cafes Hawkers	52 133 106 99 415 29 56 132 29 126 12	1,169
B. <u>Visits in Connection with Sampling</u>	Food and Drugs Sampling Ice Cream Sampling Milk Sampling Water Sampling	192 84 96 32	399
C. <u>Inspection of Food</u>	Number of Visits to All Types of Premises in Connection with Inspection of Food		189
D. Miscellaneous Visits			19
			1,776

GENERAL PROVISION

of

HEALTH SERVICES for the AREA

Table 64 LABORATORY FACILITIES

Public Health Laboratory Service, Central Laboratory, Milton Road, Portsmouth (Port.22331)

Public Analyst's Laboratory,
Trafalgar Place, Clive Road, Portsmouth (Port.23641)

Table 65 AMBULANCE FACILITIES

The Ambulance Station in the Borough is situated in Privett Road and is one of the five stations (Fareham, Gosport, Havant, Hedge End, Petersfield) in the South-Eastern Division of the County Ambulance Service. The work of these Stations is coordinated at the Main Station at Fareham and it is there that all calls for ambulances are received. Written requests for transport should be sent to the County Ambulance Station, The Tannery, North Wallington, Fareham, and verbal requests telephoned to Fareham 2170.

The Local Health Authority is not under obligation to make arrangements for the conveyance of all persons suffering from illness but only of those for whom special transport, such as the Ambulance Service provides, is necessary. Under normal circumstances, therefore, transport can be provided only on the authority of a doctor but in an emergency an ambulance can be obtained by anyone using the "999" system provided by the Post Office telephone service.

Table 66 HOME NURSING and MIDWIFERY

Nurses and Midwives, unless out on urgent cases, can normally be reached at their own homes before 9 a.m., between 1-30 and 2-30 p.m., and in the evening.

DISTRICT NURSES

Mis	s D.	Bransbury	39	The Croft, Stubbington	(Stubb. 295)
Mis	s R.	F. Gattrell		Grove Road, Gosport	(Gosp. 82133)
		Green	33	Bentham Road, Alverstoke	(Gosp. 80361)
		F. Hughes	4	Goodwood Road, Gosport	(Gosp. 80861)
		M. Morgan	96	Sydney Road, Gosport	(Gosp. 82594)
Mis	s S.	M. Pearce	116	Braemar Road, Bridgemary	(Fareham 3325)

MIDWIVES

Miss M. E. Fisher Mrs P. Fisher	89 Anns Hill Road, Gosport 36 Cuckoo Lane, Stubbington	(Gosp. 82922) (Stubb.301)
Mrs C. Gow	146 Beauchamp Ave., Bridgemary	(Fareham 3809)
Miss G. Larcombe	3 Cottes Waye, Hill Head	(Stubb. 284)
Mrs P. Lihou	112 Chantry Road, Gosport	(Gosp. 83915)
Miss N. I. Milne	14 Withies Road, Rowner	(Gosp. 81592)
Miss A. Rush	89 Anns Hill Road, Gosport	(Gosp. 82922)
Mrs R. Shaw	34 Windsor Road, Gosport	(Gosp. 82500)
Miss R. Topley	1 James Close, Bridgemary	(Fareham 3237)

Table 67 HOME HELP SERVICE

The County Council has established a Home Help Service to give help on medical recommendation to households where, owing to sickness, pregnancy, lying-in, old age or other reason, such help is necessary and cannot be obtained otherwise. Charges are made in accordance with the domestic circumstances. A leaflet on the Service giving full particulars is obtainable from:— The Divisional Home Help Organiser,

Table 68 MATERNITY & CHILD WELFARE

(a) HEALTH VISITORS

Mrs F. E. Beadsworth 89 Anns Hill Road, Gosport (Gosp. 82922) Mrs E. M. Edwards 32 Findon Road, Gosport (Gosp. 81197) Mrs M. E. Lutman 4 Prideaux Brune Ave., Bridgemary (Fareham 3432) 79 Southampton Road, Fareham Miss M. Osgood (Fareham 3591) Miss M. F. Payne 53A Cambridge Road, Gosport (Gosp. 81615) Mrs G. F. Rich 22 Oakdown Road, Stubbington (Appointed Oct. 1959)

Miss N. M. Tratsart (Left July 1959)

Mrs M. Shea 23 Heaton Road, Gosport (Gosp. 80165)

(Mrs Shea is also Chest Clinic Health Visitor for Gosport

"The Gables", Spring Garden Lane, Cosport (Gosp. 82496)

Miss J. Evans (School Nurse) 49 Bury Crescent, Alverstoke.

Health Visitors can normally be reached at their own homes before 9 am and after 5 pm.

(b) ANTE-NATAL RELAXATION CLASSES are held at the Blake Maternity Home on Friday afternoons. The instruction is given by the County Midwives.

(c) ANTE-NATAL CLINICS Blake Maternity Home: Doctors' Clinic - Thursday at 2 pm.
Midwives' " - Monday " 2 pm.

(d) CHILD WELFARE CENTRES

Blake Maternity Home, Ham Lane, Elson

Crossways Social Hall, Forton

Every Monday 9-30am - noon & 2-4pm.

Methodist Sunday School, Stoke Road

Every Wednesday 9-30am - noon & 2-4pm.

Hall of Christ The King, Wych Lane, Bridgemary

Every Thursday 2-4pm.

Brodrick Hall, Clayhall Road, Alverstoke (and 9-30 - noon as from 13.8.59)

Every Friday at 2 pm.

British Legion Hall, High Street, Lee-on-Solent

lst and 3rd Tuesdays each month from 2 pm.

Rowner Church Hut:- from 8.1.53 Wednesdays at 2 pm

" 19.2.58 additional session Wednesdays at 10 am
" 16.10.58 additional session (Health Visitor only)
Thursdays at 10 am (discontinued after 15.1.59)

Table 69 COUNTY COUNCIL SPECIAL CLINICS

The following Clinics are held at "The Gables" Spring Garden Lane (Tel Gosp. 80298):-

(a) CHILD GUIDANCE CLINIC Psychiatrist holds a Clinic every Wednesday, all day,
and every Tuesday afternoon.
Psychiatric Social Worker attends every Tuesday afternoon
and Wednesday all day.
Psychologist attends every Wednesday afternoon.
Children are seen by appointment only.

(b) MINOR ORTHOPAEDIC CLINIC Attended by Dr.P.V.Pritchard every second Tuesday in the month in the mornings.

Cases are seen by appointment only.

(c) SPEECH CLINIC Attended by Mrs J.B.Davis, L.C.S.T.

For treatment of speech disorders in children under school age and children attending maintained schools.

Patients are seen, by appointment only, Tuedays pm, Wednesdays and Fridays all day.

Table 70 SCHOOL & MINOR AILMENTS CLINIC

Health Office, 2 Stoke Road (Tel Gosp. 34242)
Attended by Dr.P.V.Pritchard, The Divisional School Medical Officer.
Open daily, except Saturdays, at 9-30 am.
Children are referred to the Clinic for treatment of minor ailments and injuries, for special medical examinations and supervision, and for immunisation.
Also used by parents, teachers and doctors for consultation with Medical Officer.
Adults are also examined for superannuation and such-like purposes.
The County Audiometrician attends every first Tuesday morning in the month to test children, by appointment only, with the audiometer. These are cases referred to this Clinic because they have, or are suspected of having, defective hearing.

Table 71 DENTAL TREATMENT

Owing to the shortage of Dental Officers, the Dental Clinics at 2 Stoke Road (Tel: Gosport 84086) and Holbrook Health Clinic (Tel: Gosport 82650) have only been attended by part-time Dental Officers, and the amounts of sessions which they have worked have varied from month to month. (The position on the 1st October 1959 was that Mr.B.R. Swinn was attending at the Stoke Road Clinic on Tuesdays and Thursdays and Mr.G.Bland at the Holbrook Clinic on Tuesday afternoons and Thursday mornings).

Consequently only a small proportion of the school children throughout Gosport are covered for routine dental inspection and treatment, but emergency treatment for the relief of pain is available for all children at the Stoke Road Clinic on Tuesday mornings; children unable to wait for this weekly clinic may be seen at either of the other clinics on the days when the Dental Officers are in attendance.

On reference to the County Medical Officer by the Doctor booked, or by a Doctor in charge of an Ante-Natal Clinic, or by the Health Visitor or Midwife, any Expectant or Nursing Mother can obtain dental treatment, including dentures if necessary, free of charge through the County Dental Service.

Treatment can also be obtained for any pre-school child in Gosport on application to the Dental Officer at the Clinic or to the County Medical Officer. Six-monthly visits by the Dental Officer to the larger Child Welfare Centres continue as in previous years.

Table 72 HOSPITAL BOARD SPECIAL CLINICS

The following Clinics for our children are held at "The Gables", Spring Garden Lane, by arrangement with the Regional Hospital Board:-

- (a) MAJOR ORTHOPAEDIC CLINIC (at Gosport War Memorial Hospital from May 1959)

 Surgeon's Clinic: Every Thursday afternoon.

 Remedial ": Every Friday, all day.
- (b) OPHTHALMIC CLINIC Every Wednesday afternoon.
- (c) TUBERCULOSIS or CHEST CLINIC (Tel: Gosport 82496)

For Patients of All Ages:- Mondays: 9-30am - noon Old Patients
2 pm New Patients
5-30pm Evening Clinic, 3rd Monday in month.

Tuesdays: 9-30am By Appointment Only. 1-30pm Re-fill Session.

Table 73 EAR, NOSE & THROAT CLINIC

Cases for examination by an Ear, Nose and Throat Specialist ar referred to the Special Department at the Gosport War Memorial Hospital.

Table 74 VENEREAL DISEASES CLINIC

St. Mary's Hospital, Portsmouth (Tel: Portsmouth 22331)

Males: Tuesdays 10am - noon Females: Mondays 5pm - 7pm Wednesdays 2pm - 4pm Fridays 10am - noon

Table 75 HOSPITAL & NURSING HOME Service for the Area is:-

War Memorial Hospital (General)	el:	Gosport	81225
Infectious Diseases Hospital	11	Portsmouth	22331
Blake Maternity Home		Gosport	81662
Haslar Hospital (Naval)	11	Portsmouth	22351
Langdale Nursing Home, The Avenue (Private)		Gosport	84161
Penrhyn Nursing Home, Bury Road (Private)	11	Gosport	82651
Thalassa Nursing Home, Western Way (Private)	11	Gosport	82382

Table 76 DAY NURSERY Podds House, 185 Brockhurst Road.....Tel: Gosport 83967

Accommodates 70 Children (aged under 5 years)

A Priority System is in operation in regard to admission to County Council Day Nurseries and Priority Cases are as follows:-

- (a) Children whose mothers are obliged to work as sole or main supporter of the family i.e. unmarried mothers and widows, or cases where the husband is unable to follow full-time employment on account of ill-health.
- (b) Children whose mothers are ill or are unable, for some reason, to care for the children themselves.
- (c) Cases of overcrowded or unsuitable home conditions, where it is necessary in the interests of the child on health grounds.

Children not coming within the above categories are admitted on the understanding that if the vacancy should be required for a priority case the child will be withdrawn.

Table 77 OCCUPATION CENTRE FACILITIES

The Occupation Centre is at St. Faith's Institute, Gordon Road, Gosport.

Training is provided for mentally handicapped children and adults. The Centre is open for five days weekly from 9-30am to 3-30pm during normal school terms. There are now 50 on the Roll. The pupils are brought to the Centre either by the special school 'bus or by the Hospital Car Service or by local 'buses. The training is graded to suit the development of each individual and all who attend benefit by the regular routine which they receive.

Table 78 VACCINATION against SMALLPOX

This is normally carried out by the Family Doctor, but Medical Officers attached to Child Welfare Centres will also carry out this service on request.

Table 79 IMMUNISATION

Immunisations against Diphtheria and/or Whooping Cough and/or Tetanus are carried out by the Family Doctor or by Assistant County Medical Officers at School Clinic, Child Welfare Centres and Day Nursery. Parents are given choice of operator.

Table 80 VACCINATION against POLIOMYELITIS

Introduced in 1956 under the National Scheme. Initially, owing to the limited supply of vaccine, vaccination was confined to a course of two injections to Selected Groups of Children born 1947-54 inclusive and registered (January to March 1956) with the C.M.O. for vaccination, and vaccinations then were only carried out by Assistant County Medical Officers at the Health Department Clinic.

Since then, with the increasing supplies of vaccine, the Scheme has been extended until, at the end of 1958, it was as follows:-

(a) Vaccination (a full course of three injections) available to:-

All persons born on or after the 1st January 1933

All Expectant Mothers

General Practitioners, Ambulance and Hospital Staffs, and their families.
(b) Registration accepted at Health Department, by Family Doctors and at Child Welfare Centres and Day Nursery.

(c) Choice of Operator - by Family Doctor or

at Health Department Clinic or, where applicable,

at Child Welfare Centre or Day Nursery.

Table 81 REMOVAL of PERSONS in NEED of CARE and ATTENTION

This is Borough responsibility under Section 47 of the National Assistance Act 1948 and the National Assistance (Amendment) Act 1951.

During the year, continuing Renewals of a Court Order were granted for the detention and maintenance of an aged and infirm female and the old lady was detained in an institution which specifically cares for such cases.

At the end of the year, action under this Section 47 was no longer applicable in the case of this old lady as she had become a hospital patient in need of continued medical and nursing care which could only be provided in hospital. Therefore, no further Renewal applications were made after October 1958.

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